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CONFIRMATION NO. 2284

<b>SERIAL NUMBER</b> 10/510,451	<b>FILING OR 371(c) DATE</b> 10/04/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 2797
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US03/11778 04/16/2003  
 which claims benefit of 60/373,224 04/16/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 74	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

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**TITLE**

Surgical stapler and method

<b>FILING FEE RECEIVED</b> 2346	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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